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23122

7590

12/26/2006

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<u>Denise Morgan</u>	(Depositor's name)
<u>Denise Morgan</u>	(Signature)
<u>3/22/2007</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/522,964

01/31/2005

Uwe Hendrich

PC10503US

6918

TITLE OF INVENTION: DISC BRAKE HAVING AT LEAST TWO FRICTION RINGS

03/27/2007 NHGUYEN2 00000032 10522964

01 FC:1501

02 FC:1504

03 FC:0001

1400.00 OP

300.00 OP

30.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE PAID
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nonprovisional

NO

\$1400

\$300

\$0

\$1700

03/26/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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KRAMER, DEVON C

3683

303-040000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1 RatnerPrestia

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Continental Teves AG & Co. oHG Frankfurt, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☐ A check is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-0350 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

3/22/2007

Typed or printed name

Christopher A. Rothe

Registration No.

54,650

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PTO/SB/21 (09-04) (AW 10/2004)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/522,964

Filing Date 01/31/2005

First Named Inventor Uwe Hendrich

Art Unit 3683

Examiner Name Devon C Kramer

Attorney Docket No. PC10503US

ENCLOSURES (Check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name RatnerPrestia

Signature 

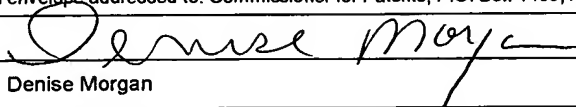
Printed Name Christopher A. Rothe

Date 3/22/07

Registration No. 54,650

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Typed or Printed Name Denise Morgan

Date 3/22/2007

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